ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	MA		04/13/0/
FEE DETERMINATION			<u> </u>
O.I.P.E. CLASSIFIER		48	5/9/0/
FORMALITY REVIEW	H.5	866	06.06.01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

/	Rejected	N	Non-elected
	Allowed	1	Interference
	(Through numeral) Canceled	Α	Appeal
	Restricted	0	Objected

Claim C Date	Claim Date	Claim Date
inal priginal Si-21-21		Final
Final Original (SS-ZL-	Final Original	Pinal
	51	101
2111	52	102
3/1	53	103
 	54	104
	55	105
6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	56	106
 	57	107
8	58	108
	59	109
10:11	60	110
	61	111
12	62	112
	63	113
14 11 11	64	114
15	65	115
16	66	116
17	67	117
18	68	118
19	69	119
20	70	120
21	71	121
22	72	122
23	73	123
24	74	124
25	75	125
26	76	126
27	77	127
28	78	128
29	79	129
30 1	80	130
31	81	131
32./	82	132
33	83	133
34	84	134
35	85	135
36	86	136
37	87	137
38	88	138
39	89	139
40	90	140
(41)	91	141
42	92	142
43	93	143
44	94	144
45	95	145
46	96	146
47	97	147
48	98	148
.49	99	149
50	100	150

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)